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TO:

Haider, Fawaad

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USPTO

FROM:

Victor Krichker

DATE:

August 16, 2007

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12620-7

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9 pages

(including cover sheet)

COMMENTS.

Response to Office Action dated April 17, 2007 for Application Serial No.

10/611,943 is enclosed.

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Effective on 12/08/2004 Complete if Known Fees pursuant to the Consolidated Appropriations Act, 2005 (# R 4818). 10/811.943 Application Number FEE TRANSMITTAL July 3, 2003 Fling Date for FY 2007 McLettan et al First Named Inventor Applicant claims small entity status See 37 CFR 1 27 Examiner Name Haider, Fawaad Art Unit 3627 TOTAL AMOUNT OF PAYMENT (\$) 60.00 Attorney Docket No 12620-7 METHOD OF PAYMENT (check all that apply) ☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) : Deposit Account Deposit Account Number, 022095 Deposit Account Name Bereskin & Part For the above-identified deposit account, the Director is hereby authorized to (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments Under 37 CFR 1.16 and 1.17 WARNING. Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PYC-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **SEARCH FEES FILING FEES EXAMINATION FEES Small Entity Small Entity** Small Entity Application Type Fee (\$) Fee(\$) Fee(\$) Fee(\$) Fee(\$) Fee(\$) Fees Paid (\$) Utility 300 150 500 250 200 100 Design 200 100 100 50 130 63 Plant 200 100 300 150 160 80 300 150 300 250 600 Reissuc 300 200 100 O 0 Provisional O 2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$) Each claim over 20 (including Reissues) 50 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 Total Claims Extra Claims Fee Paid (\$) Fee(\$) Multiple Dependent Claims -20 or HP= Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee(\$) Fee Paid (\$) - 3 or HP= mP = nignest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 spects of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) (round up to a whole number) x OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): One month extension of time 60 00 SUBMITTED BY Regionation No. Signature 50, 198 Taxophane 416 907-1699 (Attorney/Agent) Name (PrintType) VICTOR KITCHING

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TRANSMITTAL FORM		Application Number		10/611,943		
		Filing Date		July 3, 2003		
		First Named Inventor		McLellan et al		
		Art Unit		3627	3627	
(To be used for all Correspondence affer infiel filing)		Examiner Name		Haider, Fa	Haider, Fawaad	
Total Number of Pages in This Submission 8		Attorney Docket Number		12620-7	12620-7	
ENCLOSURES (check all that apply)						
Fee Transmittal Form	Drawing(After Allowance Communication to TC		
Fee Attached	Licensing-related Papers			Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)		
Amendment / Reply	Petition					
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